

# **Continuum of Care Debriefing Broadcast**

# Overview of 2003 Competition

- **414 CoC's awarded funding (84% of those requested)**
- **3,771 projects awarded funding (84% of those requested)**
- **Renewals make up 68% of funds awards**
- **Housing activities make up 53% of funds awarded**

# **Agenda for Broadcast**

- **Broadcast will follow the structure of the CoC application:**
  - **Community Process for Developing an Effective CoC**
  - **Strategy for CoC System Development**
  - **Gaps Analysis**
  - **Project Priorities**
  - **Supplemental Resources**
- **10-min break before Gaps Analysis**

# **Continuum of Care Debriefing Broadcast**

## **Section A: Community Process for Developing an Effective CoC**

***Please Stand By***

# **Community Process for Developing an Effective CoC**

- **Overall Planning Process**
- **Broad Participation and Involvement**

# **1. Overall Planning Process**

- **Continuums should have:**
  - **A single, well-coordinated planning process for homeless assistance**
  - **Clear leadership responsibility for planning activities**

# **How to Create a Legitimate Planning Process**

- **Establish the process**
- **Coordinate with other planning groups**
- **Assign responsibilities and determine mission**
- **Set an annual agenda of goals and objectives**
- **Meet year-round**

# **Promising Approaches— Planning Process**

- **Clear focus and objectives**
- **Strong committee system**



# **Common Mistakes— Planning Process**

- **Lead entity for planning not clearly identified**
- **Planning beyond application process not clearly described**
- **Link between CoC and other planning bodies not clear**

# **Common Mistakes— Planning Process (cont'd)**

- **Principal topics of planning meetings are not identified**
- **“Planning” meetings do not include strategic planning or program implementation issues**

## **2. Broad Participation and Involvement**

- **Continuums should have:**
  - **Active involvement by a broad, inclusive, and diverse group of agencies and organizations**
  - **Documentation of participation**

# Broad Participation and Involvement (cont'd)

- **Broad**: Include representative for each jurisdiction claimed
- **Inclusive**: Ensure that a wide variety of public and private sector agencies participate
- **Diverse**: Include agencies representing key subpopulations

# **Common Mistakes— Participation**

- **No evidence of participation for CoC jurisdictions**
- **No evidence of participation by key agencies and organizations**
- **Common omissions: state government, homeless/formerly homeless, law enforcement**

# **Common Mistakes— Participation (cont'd)**

- **Core subpopulations not clearly represented**
- **Connection between representative and subpopulation group unclear**
- **Frequency of participation not addressed or vague**
- **Participation in homeless assistance planning unclear**

# **Promising Approach— Documenting Participation**

- **Coded chart showing levels of participation by organization, category, and locality**



# **Special Circumstances— Balance of State and Rural**

- **Coordination is difficult in a multi-jurisdictional or rural area**
  - **Planning meetings are difficult to schedule**
  - **Travel distances make regular meeting attendance problematic**
  - **Needs and priorities may differ by region**



# **Best Practices for Balance of State and Rural CoCs**

- **Regional subgroups**
- **Standing or ad hoc committees on special issues**
- **Active networks with other state and regional agencies**
- **Conference calls, video conferences and regional meetings**

# **Promising Approach— Rural CoC**

- **Planning process led by a consortium**
- **State agency gives administrative support**
- **Regional representatives link to single-county CoCs and multi-county CoCs**

# **Promising Approach— Rural CoC (cont'd)**

- **County-level CoC organizations responsible for local planning and coordination**
- **CoC Steering Committee coordinates with other statewide organizations**

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## **Section B: Strategy for CoC System Development**

# **Strategy for CoC System Development**

- 1. Chronic Homelessness**
- 2. Other Homelessness**
- 3. Discharge Planning**
- 4. Fundamental Components of the CoC**

# **1. Chronic Homelessness**

- **Continuums should have:**
  - **A clear strategy for ending chronic homelessness by 2012**
  - **A specific, measurable action plan for the next 18 months**

# How to Address the Issue of Chronic Homelessness

- A. Follow HUD's definition of "chronic" homelessness**
- B. Identify the extent of the problem of chronic homelessness in your CoC**
- C. Describe your CoC's past, current and future strategy**



# **a) Focus on HUD's Definition of Chronic Homelessness**

- **Includes:**

- **An unaccompanied homeless person,**
- **Who has a disabling condition, and**
- **Has been continually homeless for a year or more, or has had 4 or more episodes of homelessness in the last 3 years**

- **Does not include:**

- **Homeless families with children**
- **Non-disabled individuals**



## **b) Identify the Extent of the Problem**

- **Document the number of chronically homeless people in your CoC**
- **Identify specific obstacles to ending chronic homelessness in your CoC**

## **c) Describe your CoC's Past, Current and Future Strategy**

- **Specific, measurable actions taken in the last year**
- **Current activities**
- **What you plan to do over the next 18 months**

# **Best Practices on Chronic Homeless Strategy**

- **Provide aggressive outreach for chronically homeless persons**
- **Aggressively enroll chronic homeless persons in mainstream programs**
- **Offer a range of housing options, including low-demand housing**

# **Best Practices on Chronic Homeless Strategy (cont'd)**

- **Use your chronic homeless plan as a roadmap for specialized service delivery**
- **Show performance based on last year's goals and actions**
- **Develop services to prevent chronic homelessness**

# **Chronic Homelessness— Common Mistakes**

- **Applicants fail to focus on chronic homeless as HUD defines it**
- **Applicants fail to explain special efforts beyond what is being done for the general population**
- **Applicants fail to distinguish among past, current, and future efforts**

# **Chronic Homelessness— Common Mistakes (cont'd)**

- **Applicants fail to distinguish between goals and action steps**
- **Action steps are not measurable**
- **Dates and responsible parties are not specific**



# Special Circumstances

- **Some CoCs claim they don't have a chronic homeless problem. Such applicants must:**
  - a) Document their efforts to find the chronically homeless persons in their community AND**
  - b) Demonstrate the CoC has a network in place to address chronic homelessness should the problem ever materialize**

# **Promising Approach— Outreach**

- **Aggressive outreach in downtown area and camps in city and county**
- **Downtown Rangers direct homeless persons to services rather than jail**
- **Police attend Town Hall meetings**
- **Downtown Community Court has City funding for substance abuse treatment services**



# **Promising Approach—Shelter and Day Resource Center**

- **Low-demand shelter operated in downtown area within Resource Center**
- **Day Resource Center provides basic services and access to co-located agencies offering health care, legal aid, mental health, case management, and veterans services**
- **Serves as entry point for transitional services, Safe Haven, SRO, and Shelter Plus Care**

## 2. “Other” Homelessness

- **Continuums should have:**
  - **Brief narrative of past year’s accomplishments**
  - **Specific, measurable action plan within an explicit timeframe**

## **a) A Brief Narrative of “Other” Accomplishments**

- **New units developed**
- **New services added**
- **Improved coordination among public and private service providers**
- **Special initiatives to help “other” homeless access mainstream services**

## **b) “Other” Homelessness Action Plan**

- **Include measurable action steps with clear deliverables**
- **Clearly identify who is responsible for each step**
- **List anticipated dates of completion**

# **Other Homelessness— Common Mistakes**

- **Action steps are vague**
- **Action steps are administrative not programmatic**
- **Responsible parties are vague**
- **Dates for completion are unclear**

# Future Goals Chart Examples

	<u>Goal</u> ("What")	<u>Action Steps</u> ("How")	<u>Responsible Party</u> ("Who")	<u>Target Date</u> ("When")
<u>Weak Response</u>	Reduce Domestic Violence	Write Grants Increase Housing	CoC	Ongoing
<u>Better Response</u>	Increase Domestic Violence Beds by 25%	Identify site Develop site plan Obtain financing Purchase units	Joan Smith Joan Smith Sally Diggs Jeff Kotter	Jan. 2004 Feb. 2004 Mar. 2004 April 2004

### **3. Discharge Planning**

- **Continuums should have:**
  - Evidence of a systemic plan to reduce discharges to the shelter system
  - Ongoing communication among: the CoC, discharging institutions, state and local governments



# Best Practices on Discharge Planning

- **Meet with state and local government agencies on a regular basis**
- **Develop a formal plan for addressing discharge planning**
- **Institute requirements for adequate planning for permanent housing prior to discharge**



# **Best Practices on Discharge Planning (cont'd)**

- **Include all major discharging institutions in your plan**
  - **Foster care, prisons, mental health facilities and hospitals**
- **Provide supportive services to discharged persons**
- **Ensure ongoing case management**

# **Discharge Planning— Common Mistakes**

- **Applicants abdicate responsibility—  
“the State is taking care of this  
issue”**
- **Applicants fail to monitor and  
enforce**
- **Applicants work with some, but not  
all of the discharging institutions**

# **Discharge Planning— Promising Approach**

- **Medical Respite**
- **Young Adult Housing Task Force**
- **Criminal Justice Initiative**
- **Co-Occurring Disorders Integrated Treatment**

## 4. Fundamental Components of the CoC

- **Continuums should have:**
  - A complete services inventory (Service Activity Chart)
  - A complete housing inventory (Housing Activity Chart)
  - A plan as well as steps taken to date for implementing a CoC-wide HMIS

# Best Practices on Fundamental Components

- **Completely and accurately fill out the Housing Activity Chart**
- **Provide a full inventory of prevention, outreach and supportive services in the Service Activity Chart**
- **Show clear progress to date in HMIS implementation—not just a plan for the future**

# **Fundamental Components— Common Mistakes**

- **Applicants do not describe services nor how homeless people access them**
- **Applicants fail to describe outreach services for the street homeless**
- **Figures in Housing Activities Chart and Gaps Analysis Chart are not consistent**
- **Applicants fail to provide a schedule or strategy for implementing an HMIS**

# **Continuum of Care Debriefing Broadcast**

**10-Minute Break**



# **Continuum of Care Debriefing Broadcast**

## **Section C: Gaps Analysis**

# **Why is the Gaps Analysis Important?**

- **Good data on needs drives good planning**
- **Thorough inventory means gaps can be more easily identified**
- **Good data allows CoC to apply limited resources to highest priority problems**
- **Information can be used to educate the public and justify requests for additional resources**

# **Components of the Gaps Analysis**

- 1. Housing inventory**
- 2. Determination of unmet needs**
- 3. Count of homeless populations and subpopulations**
- 4. Homeless Management Information System (HMIS)**

# 1. Housing Inventory

- **Continuums should have:**
  - A formal, regular survey of emergency, transitional, and permanent supportive housing
  - Collected at a point in time each year
  - Includes both current inventory and inventory under development

# **How to Conduct a Good Housing Inventory Survey**

- **Make a single person or entity responsible for the survey and updates**
- **Clearly define the three types of housing**
- **Make sure that providers report in units required by HUD**
- **If mail or e-mail, provide for telephone follow-up**
- **Establish a formal process for updates**

# **Make the Most of the Information in the Inventory**

- **Use inventory data to:**
  - **Determine reporting rates to HMIS**
  - **Set priorities for implementing HMIS**
  - **Determine unmet need for emergency, transitional, and permanent housing**
- **Information can be shared with community and used by providers for reporting to funders**

# **Inventory: Common Mistakes**

- **No discussion of methodology for collecting numbers and categorizing beds**
- **Not clear if survey is annual**
- **Not clear how survey is updated**



# **Inventory: Common Mistakes**

- **Survey does not cover entire geography**
- **No clear distinction between current inventory and inventory under development**
- **Must use only one code for target population; numbers must add correctly**

## **2. Determination of Unmet Housing Needs**

- **Continuums should have:**
  - **A sound methodology, not unsupported estimates**
  - **Methodology accounts for flow between housing types, but does not double-count**

# **Determination of Unmet Needs—Common Mistakes**

- **Numbers total incorrectly or fail to match across charts**
- **Cells in charts are left blank**
- **Data sources are missing**
- **Numbers are inconsistent with those used in CoC “Current” and “Under Development”**

### **3. Count of Populations and Subpopulations**

- **Continuums should have:**
  - **An attempt to count all sheltered and unsheltered homeless at a point in time**
  - **Actual counts of unsheltered homeless people, not estimates**
  - **Surveys or HMIS used to identify key subpopulations**

# **Methods of Counting Unsheltered Populations**

- **One night count of people in public places**
- **Count of homeless people using non-shelter services**

# **Counts of Populations and Subpopulations—Common Mistakes**

- **No attempt to count unsheltered homeless, estimates only**
- **Methodology hard to understand**
- **Unscientific “inflation factors” used to account for people not counted**
- **Subpopulation information based on secondary data without addressing sources and reliability**

# **Best Practices on Bed Inventory, Populations Chart, and Unmet Needs**

- **Forthcoming from HUD:**
  - **Guidebook on counting unsheltered homeless people**
  - **Guidance on shelter inventories, determining subpopulations, and unmet need**



## 4. Homeless Management Information System

- **Continuums should have:**
  - Clear progress in implementing HMIS
  - High participation in HMIS by shelters and transitional housing

# **HMIS: Common Mistakes**

- **Insufficient progress in implementing HMIS**
- **Fails to identify current participants and estimate coverage**
- **Fails to provide specific milestones for further implementation**

# **Continuum of Care Debriefing Broadcast**

## **Section D: Project Priorities**

# **Project Priorities— Key Topics to Address**

- **Project selection process**
- **Review of renewals**

# Project Selection Process

- **Continuums should have:**
  - A strong link between proposed projects and unmet needs
  - A project selection and prioritization process which is demonstrably objective and unbiased

# **An Objective and Unbiased Process Has:**

- **Objective criteria for thresholds and selection**
- **An open application process**
- **An unbiased panel to rank and select projects**
- **A clear basis for final ranking decisions**
- **Procedures to resolve complaints**

# **Common Mistakes— Project Selection**

- **Project Priority Chart completed incorrectly**
- **Need or gap filled not addressed for each project**
- **Review committee participants not identified**
- **Conflicts of interest not addressed**
- **Complaints not addressed**



# **Best Practices—Objective Rating Measures**

- **Specific criteria**
- **Weighted criteria to meet local CoC priorities**
- **Bonus points in high priority areas**

# **Promising Approaches— Objective Review Panel**

- **Special review and rating committee**
- **Diverse representation on panel**
- **Open process for nominating panel members**

# **Promising Approaches— Selection and Approval**

- **Direct use of review committee scores**
- **Voting by active CoC participants**
- **Community consensus**

## **2. Review of Renewal Projects**

- **Continuums should have:**
  - **A critical review of the performance of proposed renewal projects**

# **Best Practices—Review of Renewal Projects**

- **Monitor and review frequently**
  - Review APR findings
  - Conduct site visits
- **Consider both administrative and client outcomes**

# **Best Practices—Review of Renewal Projects (cont'd)**

- **Clearly specify responsibility for review**
- **Require response to deficiencies found**
- **Consider review results in the priority ranking process**

# **Common Mistakes— Review of Renewal Projects**

- **APR is sole basis of review; no independent CoC review**
- **Evaluation does not address client outcomes as well as administrative issues**
- **Relationship between review results and priority ranking not addressed**
- **Process occurs right before the application is submitted to HUD**



# **Examples of Performance Assessment Criteria**

- **Three general focuses:**
  - **Client outcomes**
  - **Program operations**
  - **Administrative efficiency**

# **Client Outcomes**

- **Number of clients actually served vs. original estimate**
- **Successful moves through each stage of the CoC system**
- **Mainstream resources secured**
- **Permanent housing placements**

# **Program Operations**

- **Collaboration with other providers**
- **Cost effectiveness**
- **Consumer feedback**
- **Staff qualifications**
- **Staff training on data collection/client tracking**
- **Responsiveness to obstacles encountered**

# **Administrative Efficiency**

- **Self-evaluation process in place**
- **Timeliness of report submissions**
- **Provision of anticipated matching funds and services**
- **Responsiveness to monitoring findings**

# **Promising Approach—Review of Renewals**

- **Steering Committee**
- **Renewal Project Review Criteria**
- **Renewal Ranking Process**

# **Continuum of Care Debriefing Broadcast**

## **Section E: Supplemental Resources**

# **Why Are Mainstream Resources Important?**

- **Mainstream programs have the capacity to address multiple needs**
- **Mainstream resources can provide the income needed to leave homelessness**



# **Continuums Should Have:**

- **Comprehensive process across providers and programs**
- **Equal access to immediate intake and assessment**
- **Demonstrable outcomes**

# Strategy for Accessing Mainstream Resources

- **Identifying homeless clients eligible for mainstream programs**
- **Enrolling clients in all the programs for which they are eligible**
- **Ensuring that clients receive and continue to receive benefits**

# **Methods for Providing Access to Mainstream Resources**

- **Central intake**
- **Out stationing**
- **Standardized intake procedures and mandated screening**

# **Best Practices in Identifying and Enrolling Eligibles**

- **Conducting aggressive outreach**
- **Using case managers throughout the entire process**
- **Working with each client to develop a single IDP**
- **Using standard intake forms and application forms CoC-wide**
- **Conducting regular training on mainstream programs**

# **Identifying and Enrolling— Examples**

- **Outreach teams visit lobbies of mainstream programs**
- **Common intake form**
- **Mainstream check-off list, recorded in HMIS**
- **Single application for Medicaid, TANF, and Food Stamps**

# Identifying and Enrolling— Examples (cont'd)

- **Mainstream providers in mobile answer van**
- **Two-day training on SSI**
- **Case management helps activate closed public assistance cases for families in shelters**
- **New transit route to site with co-located programs**

# **Approaches for Ensuring Eligible Clients are Enrolled**

- **Following up with clients on a regular and automatic basis**
- **Using legal aid or other advocates for appeals**
- **Using CoC meetings to identify and address system-wide problems**



# **Best Practices for Ensuring Eligible Clients are Enrolled (cont'd)**

- **Using APRs to measure renewal project's performance**
- **Conditioning grants**
- **Using HMIS to evaluate overall progress**

# Ensuring Enrollment— Examples

- **Projects assessed for why SSI or TANF not offsetting operating funds**
- **HMIS on-line client information exchange**
- **Monthly reports on activities connecting clients to mainstream programs**
- **Up to 15 points for projects with demonstrated success**

# Examples of Policy Changes that Remove Barriers

- Medicaid waiver for increased access by non-disabled poor adults
- Address not required to receive Food Stamps
- SSI pre-certification and early benefits for street homeless
- Simplified Food Stamps application for elderly and disabled

# **Common Mistakes in CoC Application**

- **Fails to describe a system-wide approach**
- **Describes mainstream services but not access by homeless**
- **Insufficient detail about identifying, enrolling, and sustaining**
- **Exclusive reliance on case management**
- **Errors and omissions on charts**

# **Promising Approach— Mainstream Resources**

- **State Dept. of Transitional Assistance is the gateway to shelter and services for homeless families**
- **Families screened by DTA case managers for TANF, Medicaid, Food Stamps eligibility**
- **Shelter case managers provided with incentives for moving families back into housing**
- **Food Stamp application streamlined**

# **Outreach and Enrollment for Medicaid Benefits**

- **Single simplified application**
- **Application includes a “homeless” check-off**
- **Application automatic with other mainstream programs**
- **In-shelter outreach by non-profits**
- **Saturation night in shelters**
- **60-70% of homeless enrolled in Medicaid**



# **Other Systems for Accessing Mainstream Resources**

- **Workforce Investment Act**
- **Veterans Health Care**
- **Enrollment in SSI**
- **Food Stamps for Individuals**



# Feedback on Today's Broadcast

- We need your feedback on this broadcast to plan future guidance on this topic
- Please complete the online survey at:  
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